

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

700	04	
, 🔾	OMB APPF	ROVAL
	OMB Number:	3235-0076
	Expires:	
	Estimated average	ge burden

SEC USE ONLY						
Prefix	Serial					
DA	E RECEIVED					
I	1					

hours per response.

				<u> </u>
Name of Offering ( check if this	s is an amendment and name has changed, and	indicate change.)		1
Series B Convertible Preferred S	Stock			<u>)                                      </u>
Filing Under (Check box(es) that appl	ly): Rule 504 Rule 505 📝 Rule	506 Section 4(6)	ULOE	]
Type of Filing: New Filing	/ Amendment	_		I THE REPORT OF THE PERSON OF
		·		06049608
·	A. BASIC IDENTIFICA	TION DATA		<u> </u>
1. Enter the information requested	about the issuer		_	
Name of Issuer ( check if this is	an amendment and name has changed, and ind	icate change.)		
Terralliance Technologies, Inc.		,		
Address of Executive Offices	(Number and Street, Ci	ty, State, Zip Code)	Telephone N	umber (Including Area Code)
100 Bayview Circle, Suite 315, N	lewport Beach, CA 92660		949-655-2371	1
Address of Principal Business Operati (if different from Executive Offices)	ions (Number and Street, C	ity, State, Zip Code)	Telephone N	Number (Including Area Code)
Brief Description of Business				PROCESSED
Natural resources exploration			,	HOOLOGED
				OCT 1 C 2000
Type of Business Organization	,			OCT 2 6 2008
corporation	limited partnership, already formed	other (p	lease specify):	THOMSON /
business trust	limited partnership, to be formed			FINANCIAI
	Month Year			
Actual or Estimated Date of Incorpora			nated	
Jurisdiction of Incorporation or Organ	nization: (Enter two-letter U.S. Postal Service			
	CN for Canada; FN for other foreig	n jurisdiction)		

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

<u> </u>		2.8.9 2.0 4.4	ENTIFICATION DATA		
2. Enter the information re	equested for the fo	llowing:			
• Each promoter of	the issuer, if the is:	suer has been organized w	ithin the past five years;		
<ul> <li>Each beneficial ow</li> </ul>	ner having the pow	er to vote or dispose, or di	rect the vote or disposition	of, 10% or more of	f a class of equity securities of the issuer
<ul> <li>Each executive off</li> </ul>	icer and director o	f corporate issuers and of	corporate general and man	naging partners of	partnership issuers; and
<ul> <li>Each general and r</li> </ul>	nanaging partner o	f partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Olson, Erlend	f individual)		· ·		
Business or Residence Addre 100 Bayview Circle, Suit	•	• • • • • • • • • • • • • • • • • • • •	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, i Brett, Doug	f individual)				·
Business or Residence Addre	· ·	= = = = = = = = = = = = = = = = = = =	ode)		
431 Boler Road, London,	Ontario N6P IP2	2, Canada			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Lacob, Joe	f individual)			***************************************	
Business or Residence Addre	•		ode)		
2750 Sand Hill Road, Me	nlo Park, CA 94	025			
Check Box(es) that Apply	Promoter	✓ Beneficial Owner	Executive Officer	Director -	General and/or Managing Partner
Full Name (Last name first, i KPCB Holdings, Inc., as I					-
Business or Residence Addre 2750 Sand Hill Road, Me		•	ode)		
Check Box(es) that Apply:	<b>✓</b> Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Khan, Nyle	f individual)				
Business or Residence Addre 16621 Kennedy Road, L		•	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre 100 Bayview Circle, Suit			ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	SS (Number and	Street, City, State, Zip Co	ode)		
	(Use bla	nk sheet, or copy and use	additional copies of this sl	heet, as necessary	)

				n William n Wa	В. І	NFORMAT	ION ABOU	T OFFERI	NG	:			·
1.	Has the	issuer sol	d, or does ti	he issuer i	ntend to se	II, to non-a	ccredited i	nvestors ir	this offer	ing?		Yes	No <b>⊡</b>
			ŕ			Appendix				_			1000
2.	What is	the minin	num investn	nent that w	ill be acce	pted from a	any individ	lual?				\$_300	0,000.00
,	Does the offering permit joint ownership of a single unit?											Yes	No
3. 4.												K	
7.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful N/	•	Last name	first, if ind	ividual)									•
		Residence	Address (N	lumber ånd	1 Street, C	ity, State, Z	(ip Code)						
Nai	me of As	sociated B	roker or De	aler									
Sta	tes in Wh	nich Persor	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						•
	(Check	"All State	s" or check	individual	States)				***************************************			☐ Al	I States
	AL	AK	AZ	AR	CA	CO	CT]	DE	DC	FL	GA	HI	[ID]
	IL	ĪN	ĪA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK NW	OR	PA
	RI	SC	SD	[TN]	TX	UT]	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (	Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (	Number an	d Street, C	City, State,	Zip Code)						
Nai	me of As	sociated B	roker or De	aler									
Sta	tes in Wh	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						<del></del>
	(Check	"All State	s" or check	individual	States)			,	***************************************			☐ Al	1 States
	AL	ĀK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	н	<b>ID</b>
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR. WY	PA PR
					<u> </u>	<u>(01)</u>		<u> </u>	<u>(WA)</u>			(** 1,)	
Ful	l Name (	Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)		·- · · ·				
Na	ne of As	sociated B	roker or De	aler									•
Sta	tes in Wh	nich Person	ı Listed Ha	s Solicited	or Intends	to Solicit	Purchasers				<u> </u>		
	(Check	"All State	s" or check	individual	States)		•••••					☐ Al	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
		Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt		\$
	Equity	<u>\$_35,303,047.00</u>	\$_35,303,047.00
	☐ Common ☑ Preferred		• •
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)		
	Total	<sub>\$_</sub> 35,303,047.00	\$_35,303,047.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$ 35,303,047.00
	Non-accredited Investors		\$ 0.00
	Total (for filings under Rule 504 only)	7	\$_35,303,047.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	•	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505	· <b>.</b>	\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$_0.00
	Printing and Engraving Costs		\$_0.00
	Legal Fees		\$ 80,000.00
	Accounting Fees	<del>-</del>	\$
	Engineering Fees	_	\$
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify)		\$ 0.00
	Total		\$ 80,000.00

	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gro	SS	35,223,047.00
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for archeck the box to the left of the estimate. The total o proceeds to the issuer set forth in response to Par	ny purpose is not known, furnish an estimate an fthe payments listed must equal the adjusted gro	nd	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		🔲 \$	_ 🔲 \$
	Purchase of real estate		🔲 \$	_ 🗆 \$
	Purchase rental or leasing and installation of mag	chinery		•
	and equipment	· · · · · · · · · · · · · · · · · · ·	🗌 \$	_ \$
	Construction or leasing of plant buildings and fac	🗌 \$	_ 🗆 \$	
	Acquisition of other businesses (including the val offering that may be used in exchange for the assissuer pursuant to a merger)	ets or securities of another		□\$
	Repayment of indebtedness			
	Working capital		_	
	Other (specify):			
				\$
	Column Totals		\$_0.00	_ [ \$_35,223,047.00
	Total Payments Listed (column totals added)			
		D. FEDERAL SIGNATURE		
sig	issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	rnish to the U.S. Securities and Exchange Comn	nission, upon writt	
Iss	ner (Print or Type)	Signature /	Date	
	rralliance Technologies, Inc.	1 H/1 -	October 6, 200	6 .
	ne of Signer (Print or Type)	Title of Signer (Print or Type)	.l	
	nd Olson	President		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No
	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Terralliance Technologies, Inc.		October 6, 2006
Name (Print or Type)	Title (Print or Type)	
Erlend Olson	President	

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX 2 . 3 4 1 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Non-Accredited Accredited Yes No Investors **Investors** Yes No State Amount Amount ALΑK AZAR $\mathsf{C}\mathsf{A}$ CO CTDE DC FL $\mathsf{G}\mathsf{A}$ HI ID IL IN IΑ KS KY LA ME MD MA ΜI MN MS

## **APPENDIX** 2 3 4 5 1 Disqualification Type of security under State ULOE and aggregate Intend to sell (if yes, attach Type of investor and to non-accredited offering price explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited Yes No **Investors Investors** Yes No State Amount Amount MO MT NE NVNH NJ NM ŃΥ NC ND OH OK OR PΑ RI SCSD TN ΤX UT VT VAWA WV WI

				APP	ENDIX			· .					
1		2	3		4				5				
-	Intone	l to sell	Type of security and aggregate					under St	lification ate ULOE				
	to non-a	ccredited s in State	offering price		Type of investor and				Type of investor and explana			(if yes, attach explanation of waiver granted)	
		-Item 1)	(Part C-Item 1)		(Part C-Item 2)			(Part E-Item 1)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No				
WY													
PR													